

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/587208

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY TYPE <input type="checkbox"/>	OTHER THAN SMALL ENTITY OR <input type="checkbox"/>	RATE <input type="checkbox"/>	FEI <input type="checkbox"/>
U.S. NATIONAL STAGE FEES						
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT. = \$ 300	BASIC FEE	OR <input type="checkbox"/>	BASIC FEE <input type="checkbox"/> <b>30</b>	
EXAMINATION FEE	Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200	EXAM. FEE		EXAM. FEE <input type="checkbox"/> <b>20</b>	
SEARCH FEE	U.S. or ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500	SEARCH FEE		SEARCH FEE <input type="checkbox"/> <b>400</b>	
FEE FOR EXTRA SPEC. PGS.	minus 100 =	/ 50 =	X \$ 125 =		X \$ 250 =	
TOTAL CHARGEABLE CLAIMS	7 minus 20 =	.	X \$ 25 =	OR <input type="checkbox"/>	X \$ 50 =	
INDEPENDENT CLAIMS	7 minus 3 =	.	X \$ 100 =	OR <input type="checkbox"/>	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>	+ \$ 180 =	OR <input type="checkbox"/>	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2			TOTAL <input type="checkbox"/>	OR <input type="checkbox"/>	TOTAL <input type="checkbox"/>	

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY OR <input type="checkbox"/>	OTHER THAN SMALL ENTITY OR <input type="checkbox"/>
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/>
Total	*	Minus	**	=	X \$ 25 =
Independent	*	Minus	***	=	X \$ 100 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+ \$ 180 =	+ \$ 360 =
				TOTAL ADDIT. FEE <input type="checkbox"/>	TOTAL ADDIT. FEE <input type="checkbox"/>
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/>
Total	*	Minus	**	=	X \$ 25 =
Independent	*	Minus	***	=	X \$ 100 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+ \$ 180 =	+ \$ 360 =
				TOTAL ADDIT. FEE <input type="checkbox"/>	TOTAL ADDIT. FEE <input type="checkbox"/>

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

BEST AVAILABLE COPY